PROJECT OFFICE QUALITY ASSURANCE AUDIT REPORT YUCCA MOUNTAIN PROJECT AUDIT OF SANDIA NATIONAL LABORATORIES

AUDIT NUMBER 88-96

CONDUCTED: JULY 25 - AUGUST 3, 1988

Prepared By: Gerard Heaney Lead Auditor

Date: <u>9' 1</u> 33 2 W. R. Sublette

Lead Technical Specialist

Approved By EClark for H.H. Caldwell	Date: 9/19/85
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Division Manager, Audits

Z. Approved By: Date: <u>- /53</u> James Blaylock

James Blaylock J Project Quality Manager

.

EXECUTIVE SUMPARY

PROJECT OFFICE AUDIT REPORT NO. 88-06

SANDIA NATIONAL LABORATORIES

ALBUQUERQUE, NEW MEXICO

July 25 through August 3, 1988

It is the opinion of the Project Office audit team that there is an awareness of Quality Assurance throughout the Sandia organization. The implementation of the QA program at Sandia is effective with the following exceptions:

- 1) the SNL audit program should utilize technical auditors when performing audits of design subcontractors,
- the submittal of records from subcontractors to Sandia and a timely technical and QA review of these records at the close of an activity or contract would enhance the content of record packages, and
- 3) the assignment of training to Sandia personnel should be reevaluated as some personnel have not been assigned some basic training. Additionally, training should be given to revisions of procedures to maintain proficiency.

Fourteen deficiencies were identified during the course of the audit. The audit team also generated twenty-five observations and six recommendations. Several of the deficiencies could have been avoided had Sandia submitted to Project Office in a timely manner, a QAPP meeting NWSI NVO-196-17 Revision 5, requirements. Timely submittal of future QAPP revisions and subsequent incorporation of revised requirements into Sandia implementing procedures would help to bring the Sandia QA Program into full compliance with YMP Quality Assurance requirements.



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1.0 INTRODUCTION

This report contains the results of a Quality Assurance Audit of the Sandia National Laboratories (SNL) support of the Yucca Mountain Project (YMP). The audit was conducted at the SNL facilities in Albuquerque, NH, on July 25 through August 3, 1988. Although originally scheduled to conclude on July 29, 1988, the audit was extended to August 3, 1988, to allow for a more in-depth review by the audit team of certain quality related activities performed by SNL. The audit was conducted in accordance with the requirements of the Waste Management Project Office (NMPO) Quality Assurance Program Plan (QAPP), WMPO/88-1, Rev. 0, and Quality Management Procedure (QMP)-18-01, "Audit System for the Waste Management Project Office," Rev. 2.

2.0 AUDIT SCOPE

The purpose of this audit was to evaluate the effectiveness of the SNL Quality Assurance Program through verification of the implementation of the SNL QAPP, Rev. 0, and its implementing procedures.

3.0 AUDIT TEAM PERSONNEL

The audit team const	isted of:	
Benry H. Caldwell	Audit Team Leader	SAIC, Las Vegas, NV
Gerard Heaney	Lead Auditor	SAIC, Las Vegas, NV
Catherine Thompson	Auditor	SAIC, Las Vegas, NV
James Ulseth	Auditor	SAIC, Las Vegas, NV
Stephen Dana	Auditor	SAIC, Las Vegas, NV
William Camp	Auditor	SAIC, Las Vegas, NV
Frederick Ruth	Auditor	SAIC, Las Vegas, NV
Wendell B. Mansel	Auditor	YMP, Las Vegas, NV
Mae Cotter	Auditor Candidate	SAIC, Las Vegas, NV
William Sublette	Lead Technical Specialist	SAIC, Las Vegas, NV
Forrest D. Peters	Technical Specialist	SAIC, Las Vegas, NV
Margaret C. Brake	Technical Specialist	SAIC, Las Vegas, NV
David Cummings	Technical Specialist	SAIC, Las Vegas, NV
Barry Dial	Technical Specialist	SAIC, San Francisco, CA
John Tinucci	Technical Specialist	SAIC, San Francisco, CA
Steven Moolfolk	Technical Specialist	SAIC, Las Vegas, NV
U-Sun Park	Technical Specialist	SAIC, Las Vegas, NV
Ton Hatson	Technical Specialist	Harza, Las Vegas, NV
David Brown	Observer	DOE/HQ (Weston)
James Donnelly	Observer	NRC, Washington, DC
Joseph Holonich	Observer	NRC, Washington, DC
John Peshal	Observer	NRC, Washington, DC
Naiem Tanious	Observer	NRC, Washington, DC
William Belke	Observer	NRC, Washington, DC
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3.0 AUDIT TEAM PERSONNEL (CONTINUED)

Marshall Davenport Observer Susan Zimmerman Observer James Grubb Observer Frank Kendorski Observer Anthony Baca Observer Steven Leedon Observer Observer Royce Monks Stanley Klein Observer Christopher Arana Observer Francisco Cheng Observer Jay Jones Observer

SAIC, Las Vegas, NV State of Nevada State of Nevada State of Nevada YMP, Las Vegas, NV YMP, Las Vegas, NV YMP, Las Vegas, NV SAIC, Las Vegas, NV DOE/AL, Albuquerque, NM DOE/AQ (WESTON) DOE/BQ Hashington, DC

4.0 SUPPARY OF AUDIT RESULTS

4.1 Statement of Program Effectiveness

This evaluation of the SNL Quality Assurance Program indicates a noticeable awareness of Quality Assurance throughout the organization, as evidenced by interviews of SNL personnel by the entire audit team. The SNL level of cooperation given the audit team enabled them to perform an in-depth investigation and evaluation of the implementation of the QA prograw. Based on this investigation and evaluation, the audit team concludes that the QA Program implementation at SNL is effective, with the following exceptions:

- 1. The utilization of technical personnel in performing audits and surveillances would greatly enhance the effectiveness of the SNL audit and surveillance program. Much of the work reviewed in the area of design is performed by subcontractors. Subcontractors must submit final results by the end of their contracts. If the work performed by these subcontractors is not audited or reviewed by technical staff personnel in process, assurance that the final product meets project quality assurance and technical requirements is decreased. Additionally, SNL has not implemented requirements contained in the NEWSI QAP NVO-196-17, Rev. 5, for the surveillance of technical activities within SNL. As a result, the audit team recommends that the Project Office perform audits of primary SNL design subcontractors (Bechtel and Parsons Brinkerhoff) or that SNL utilize Project Office technical staff in the performance of audits of these organizations.
- 2. The establishment of a time frame for records to be submitted from subcontractors to SNL, and a mandatory technical and QA review of records at the close of a DIM, PDM or contract, would enhance the content and effectiveness of the records packages for quality related activities. Most of the audit team members found that many DIM and PDM files had missing information or contained different types of information, and that some files did not have a technical review even after contracts were closed (some cases over one year).





4.1 Statement of Program Effectiveness (Continued)

3. The training program could be more effective by providing minimum training requirements for each type of job position within SNL. The audit team observed that training given to personnel with the same position varied and that some basic training in procedures (e.g., the procedure on generating NCRs for which everyone has responsibility) was not evident. Additionally, SNL personnel are not retrained in revisions of procedures. Retraining in revisions of procedures is essential to maintain proficiency in the quality assurance requirements.

4.2 Summary

A total of 14 Standard Deficiency Reports (SDRs) and 25 observations were identified as a result of the audit. In addition the audit team generated 6 recommendations for the consideration of the SNL Yucca Mountain Project (YMP) staff. A synopsis of the SDRs and observations and the actual recommendations are contained in Section 6.0 of this report.

Deficiencies identified by the Project Office are qualified by severity level, which is related to the significance of the deficiency. A discussion of the severity levels is provided in Enclosure 1.

The following program elements were deemed to be in compliance with the requirements of the SNL QAFP, Rev. 0, and its implementing procedures:

- Procurement Document Control 4.0
- 6.0 Document Control
- Control of Purchased Material, Equipment, and Services 7.0
- 8.0 Identification and Control of Samples and Items
- 10.0 Inspection and Surveillance
- 11.0 Equipment and Equipment Test Control 12.0 Control of Measuring and Test Equipment
- 13.0 Handling, Storage, and Shipping

Program elements in which the audit team identified deficiencies were:

- 1.0 Organization
- 2.0 Quality Assurance Program
- Scientific Investigation Control and Design Control 3.0
- 5.0 Instructions, Procedures, and Drawings
- 15.0 Nonconformances
- 16.0 Corrective Action
- 17.0 Quality Assurance Records
- 18.0 Audits





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4.2 Summary (Continued)

The following programmatic elements were not within the scope of the audit:

9.0 Control of Processes 14.0 Inspection and Test Status

The audit team did perform investigations of the SNL QA program to confirm that these programmatic elements are not applicable to the present scope of work at SNL.

The following technical activities were reviewed as part of this audit:

1.2.1.3.1, Site and Engineering Properties Data Base 1.2.1.3.3, Reference Information Base 1.2.1.4.1, Flow and Radionuclide Transport 1.2.4.2.1.1, Rock Mass Analysis 1.2.4.2.1.3, Laboratory Properties 1.2.4.6.1, Repository Performance Code Development/Certification 1.2.4.6.3, Preclosure Safety Analysis 1.2.4.1.2, Basis for Design (Seismic Activities) 1.2.4.3.2, Surface Facilities 1.2.4.3.3, Shaft/Ramps 1.2.4.3.4, Underground Excavations 1.2.4.3.5, Underground Excavations 1.2.4.6.2, Design Analysis

5.0 AUDIT MEETINGS

5.1 Preaudit Conference

A preaudit conference was held with the SNL Technical Project Officer (TPO) and his staff at 10:00 a.m. on July 25, 1988. The purpose, scope and proposed agenda for the audit were presented. A list of attendees for this meeting is provided in Enclosure 2.

5.2 AUDIT STATUS MEETING

An audit status meeting was held with the SNL TFO and his staff at 2:00 p.m. on July 29, 1988. A status of how the audit was progressing was presented. During the meeting, the decision to continue the audit in the following week was confirmed. The audit team required an extension to allow for a more in-depth review of certain quality related activities performed by SNL. A list of attendees for this meeting is also provided in Enclosure 2.

5.3 POSTAUDIT CONFERENCE

The postaudit conference was held at 10:00 a.m. on August 3, 1988. A synopsis of the preliminary SDRs and observations identified during the course of the audit was discussed with the SNL TPO and his staff. A list of attendees for this meeting is also provided in Enclosure 2.





6.0 SYNOPSIS OF SDRs OBSERVATIONS AND RECOMMENDATIONS

- 6.1 Standard Deficiency Reports (SDRs)
 - 1. SNL Audit Report MAC 88-1 was not issued within 30 working days as required. Refer to SDR No. 166, Severity Level 3.
 - 2. There was no objective evidence that SNL nonconformance reports have been transmitted to the QA Support Contractor, the Project Office Division Directors, and the SNL TPO. Refer to SDR No. 167, Severity Level 3.
 - 3. For the issuance of stop work orders on March 21, 1988, the following procedural violations were noted:
 - A) Receipt acknowledgments were not obtained.
 - B) Documented corrective actions were not provided by letter or memo to the initiator.
 - C) Recision of the 10 stop work orders was not documented.

Refer to SDR No. 168, Severity Level 3.

- 4. Position descriptions do not identify minimum education and experience requirements. Refer to SDR No. 169, Severity Level 2.
- 5. There was no objective evidence of QA review or approval of design input or output documents as required. Refer to SDR No. 170, Severity Level 2.
- 6. Responses to audit findings resulting from SNL internal audit 87-1 were received later than the 30 days required by procedures. Refer to SDR No. 171, Severity Level 2.
- 7. SNL has delineated less restrictive design verification requirements for QA Level II activities than for QA Level I activities without proper justification and approval from the Project Office. Refer to SDR No. 172, Severity Level 2.
- 8. SNL is performing QA Level III scoping work in WBS 1.2.4.2.1.3.s "Laboratory Properties," which is a QA Level I activity. Refer to SDR No. 173, Severity Level 2.
- SNL documents are being corrected (i.e., lineouts, writeovers, etc.) without being initialed and dated for procedural requirements. Refer to SDR No. 174, Severity Level 3.





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6.1 Standard Deficiency Reports (SDRs) (Continued)

- Documentation of calculations and computer program verifications performed by subcontractors was not in closed DIM files. Refer to SDR No. 175, Severity Level 2.
- 11. Design documentation did not contain a justification for using data that was not contained in the NNWSI Project Reference Information Base. Refer to SDR No. 176, Severity Level 2.
- 12. There is no objective evidence that SNL personnel have received retraining in procedures upon revision. Refer to SDR No. 177, Severity Level 2.
- 13. SNL QA has not performed a review of SNL technical procedures. Refer to SDR No. 178, Severity Level 2.
- 14. Complex design calculations have been performed with the SNL procedure for routine calculations. Refer to SDR No. 179, Severity Level 2.

Information copies of the above SDRs are provided in Enclosure 3.

6.2 OBSERVATIONS

- 1. The methods for the correction of records that have been processed into the SNL records center files are not proceduralized. Minor corrections to records are allowed to be made by the records coordinator. However, minor corrections are not defined in the procedure. Refer to Observation No. 88-06-01.
- 2. SNL Department Operating Procedures (DOPs) are revised and issued to subcontractors. A review of subcontractor NNWSI Project QA manuals indicated that the SNL DOPs that were directly incorporated into the subcontractor QA manuals have not been revised. No objective evidence was provided to demonstrate that there is a review for impact performed on subcontractor QA procedures when DOPs are revised. Refer to Observation No. 88-06-02.
- 3. SNL does not presently have approved procedures for organization or trend analysis. Refer to Observation No. 88-06-03.
- 4. SNL should develop a formal interface with the USGS for the exchange and review of seismic data collected during monitoring of underground nuclear explosions and earthquakes. Refer to Observation No. 88-06-04.
- 5. Modified Work Plans are out of date or contain errors. SNL is requested to provide a schedule indicating when the work plans will be revised. Refer to Observation No. 88-06-05.



6.2 OBSERVATIONS (Continued)

- 6. Manuscript Review Sheets for SNL design output documents were not completed correctly. Refer to Observation No. 88-06-06.
- 7. SNL does not use review and comment sheets to demonstrate that a review of procedures and technical documents has been performed and that comments/concerns have been resolved. The approval signature is used by SNL to signify that a review has been performed. Refer to Observation No. 88-06-07.
 - 8. SNL is using an unproceduralized checklist to document the review and check of design drawings. Refer to Observation No. 88-06-08.
 - 9. QA Level III or non-qualified data are being used in the performance of QA Level II design activities. Refer to Observation No. 88-06-09.
- 10. The assignment of QA levels to some design tasks should be reviewed, since the present levels assigned do not appear appropriate. Refer to Observation No. 68-06-10.
- 11. Model development for fluid flow and radionuclide transport is presently being performed at QA Level III and is expected to continue at QA Level I at some point in the future before the license application process. There are no established criteria for transition from QA Level III to QA Level I. Refer to Observation No. 88-06-11.
- 12. DOP 3-4 "Design Investigation Control" Rev. B, does not require the certification of analysts by the supervisor yet DOP 3-3 "Analysis Definition Requirements" does. The procedures are inconsistent. Refer to Observation No. 88-06-12.
- 13. The training assigned to SNL personnel by SNL supervisors should be reevaluated. There are inconsistencies in the training assigned to personnel who hold similar positions within the organization. Refer to Observation No. 88-06-13.
- 14. The traceability of design and experimental activities from the final output documents (SAND reports) to the supporting input documents, Sandia Letter Reports (SLTRS), to the Design Investigation Memos (DIMs) or Problem Definition Memos (PDMs) and then to the task identified in the modified work plan, is difficult. Refer to Observation No. 88-06-14.
- 15. SAND reports do not provide subsequent application guidance or limitations for the information/data contained within the reports. Refer to Observation No. 88-06-15.







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6.2 OBSERVATIONS (Continued)

- 16. Traceability of data and analyses through subcontractor calculation notebooks is poor. Refer to Observation No. 88-06-16.
- 17. SNL should set up a project file to store computer-generated analysis files. Presently, principal investigators or analysts are responsible for maintaining analysis files in their own file areas. Refer to Observation No. 88-06-17.
- 18. Review of DIM files containing computer code verifications indicates much variation in methods of documentation. A uniformly documented verification file would ensure adequate verification efforts as well as make it easier for outside individuals to evaluate the verification effort. Refer to Observation No. 88-06-18.
- 19. Unqualified data is being used in QA Level II Laboratory Properties activities. The resulting data is not consistent with the QA level assigned to the task. Refer to Observation No. 88-C6-19.
- 20. An inadequate response to Observation No. 10 from YMP Audit 87-5 was submitted by SNL to the Project Office. The SNL response did not address all concerns presented in the observation. Refer to Observation No. 88-06-20.
- 21. There is a lack of traceability for some rock mechanics data from its initial measurement to incorporation into project documents. Refer to Observation No. 88-06-21.
- 22. Inconsistencies were noted for rock property values between tables in the SCP/CDR and the RIB. Refer to Observation No. 88-06-22.
- 23. A software certification form was not filed with the software QA clerk. Refer to Observation No. 88-06-23.
- 24. Modifications were not made to a PDM indicating changes in the PDM scope after the use of a particular computer program was changed. Refer to Observation No. 88-06-24.
- 25. There is no proceduralized method to verify computer model inputs to ensure typographical errors are corrected prior to final verification erforts. Refer to Observation No. 88-06-25.

The observations are contained in Enclosure 4.





6.3 RECOMMENDATIONS

Recommendation No. 1

SNL DOP 17-1, "Records Management System" Rev. 0, Appendix C., para. 2.4.4 states in part: "If during receipt inspection the Records Clerk has attempted to find the date of a document and has been unsuccessful, use the date of indexing the record. In the comments field note that the date was missing from the record."

It is recommended that a procedure clarification or change be initiated to eliminate the practice of the Records Clerk from using the indexing date as the date of the record/dc-ument. The Records Clerk should insist that the record initiator establish the true date.

Recommendation No. 2

SNL DOP 6-2, "Reviewing, Approving and Issuing Technical Documents," Rev. 0, para. 3.0, does not adequately describe what measures will be taken if changes are made to a contractor document subsequent to the (1) Line Review or (2) NVO review or final review. The procedure (para. 3.17) does state that the editor will work with the monitor to ensure that the contractor concurs with all changes made to the document. However, the procedure does not describe how the concurrence of changes will take place or how it will be documented. The procedure should be revised to clearly state how the originator will be notified of any document changes (i.e., a clear documentation trail should be established). In addition, figure 3 should be revised to show the contractor in the flow chart somewhere after the final review.

Recommendation No._3

The audit team recommends that SNL procedures contain an effective date indicating when requirements are in effect and should be implemented. Some audit team members were confused about whether the last signature date on the cover page of each procedure was the effective date, or if the distribution date on the SNL YMP Project Master Document List of Controlled Documents was in fact the effective date.

Recommendation No. 4

It is recommended that rock core samples selected for mechanical testing be visually described prior to testing. The purpose of this description is to identify if the rock core sample is intact, fractured, or jointed, or possibly contains healed fractures or joints. Post-failure examinations of the sample should also be performed to determine if failure was through previously unrecognized fractures or if failure was not through previously described healed fractures or joints. Other important sample characteristics that should be identified are the existence of large clasts and vugs.







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Recommendation No. 4 (Continued)

This type of sample description information is necessary for the individual analyzing the results of the mechanical test data to determine if the results of a test are truly representative of an intact sample with no large clasts or vugs. Presently, there is no procedure for this type of sample characterization. Considering the fact that numerous subcontractors may be testing samples in the future, it is recommended that a procedure be written to standardize the sample description process.

Recommendation No. 5

- 1) The records file for PDM 74-002 is missing the PDM and acceptance memo.
- 2) An acceptance memo is not contained in the records file for DIK 122.

It is recommended to supplement these files as appropriate. When initial instructions in PDMs and DIMs are supplemented, documentation (e.g., telephone conference reports or contact reports) of changes should be added to the records file. Additionally, supplemental information provided to subcontractors in PDMs and DIMs should include the same approval as the original DIM or PDM.

Recommendation No. 6

DIMs reviewed during the audit (DIMs 4, 9, 18, 20, 37, 39, 122 and 124) do not significantly address consideration of alternate methodologies/ models and documentation of justification for their selection. Increasing emphasis in this area will significantly enhance the quality of the results and its defensibility in licensing.

7.0 REQUIRED ACTION

A written response is required for each Standard Deficiency Report (SDR) delineated in Section 6.0 above. The original copies of the SDRs were forwarded to the SNL TPO on August 30, 1988. Responses to each SDR are due 20 working days from the date of the SDR transmittal letter. upon response, acceptance, and satisfactory verification of all remedial and corrective actions, the SDRs will be closed and SNL will be notified by letter of the closure.

A written response is required for 24 of the 25 observations contained in Enclosure 4 of this report. Responses are due 25 working days after the transmittal letter of this audit report.

Written responses are not required for the recommendations contained in this audit report. The recommendations were generated by the audit team for the SNL staff to consider during implementation of its Quality Assurance Program.





ENCLOSURE 1

Severity Levels

Severity Level 1

Significant deficiencies considered of major importance. These deficiencies require remedial, investigative, and corrective actions to prevent recurrence.

Severity Level 2

A deficiency which is not of major importance, but may also require remedial, investigative, and/or corrective action to prevent recurrence.

Severity Level 3

A minor deficiency in that only remedial action is required. These deficiencies are generally isolated in nature or have a very limited scope. In addition, the integrity of the end result of the activity is not affected nor does the deficiency affect the ability to achieve those results.







AUDIT REPORT 88-06 ENCLOSURE 2

		EANJAAAA				
NAME	ORGANIZATION	TITLE	PREAUDIT	DURING	ALDIT STATUS MEETING	POSTAUDIT
الانتخاب بين الله الله الله الله الله الله الله الل						
Arana, Christopher	SNL.	QA Engineer	X	X	X	
Baca, Anthony L.	DOE/NV	General Engineer	X	X		
Bauer, Stephan	SNL	MIS	X	Χ	X	X
Belke, William	US/NRC	QA Project Manager	X	X	X	
Bingham, F. W.	SNL	Division Supervisor	x	X	X	X
Blaylock, Robert L.	SNL	Audit Coordinator	X		X	X
Blejwas, T. E.	SNL	Division Supervisor	X	X	X	X
Brake, Marge	SAIC	Systems Engineer	X	X		
Brockman, D. L.	SNL	Administrative Assist	ant X	x		
Brown, David	DOE/WESTON	QA Representative	X	x	X	X
Bushmire, D. W.	SNL	Division Supervisor	X	X	x	
Byars, Larry	SNL	TSA	X	x	X	X
Caldwell, Benry H.	SAIC	Manager, Audits ATL	X	x	x	X
Camp, William	SAIC	QA Engineer	x	x	x	
Costin, Laurence	SNL	MIS	X	X	· X	
Cotter, Mae	SAIC	Branch Manager	X	X		
Cussings, David	SAIC	Technical Speicalist	X	X		
Dana, Stephen L.	SAIC	QA Engineer	X	x		
Davenport, J. M.	SAIC	Licensing Engineer	X	x		
Dengler, Samuel R.	SNL	STA	x	x		X
Dial, Barry	SAIC	Technical Speicalist	X	x		
Donnelly, James	US/NRC	QA Engineer	X	X	X	
Eghartner, Brizy L.	SNL.	MIS	X	X		
Estrada, Joseph	MSD/AL	Acting Branch Chief	X			x
Green, Mary W.	SNL	MIS	X	X		X
Grubb, James	State of NV	Engineer	X	X		
Beaney, Gerard	SAIC	QA Engineer	X	X	x	X
Hill, Roger R.	SNL	TSA	X	X	X	X
Hines, Jim	doe/al	Director, NHQA	X		X	
Bolonich, Joseph	US/NRC	Project Manager	X	X		
Hunter, Thomas	SNL	TPO	X	x	X	x
Jones, Jay G.	DOE/Headquarters	QA Geologist	x	X	x	





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AUDIT REPORT 88-06 ENCLOSURE 2

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ANDE	ORGANIZATION	TITLE	PREAUDIT CONFERENCE	DURING AUDIT	AUDIT STATUS MEETING	POSTALDIT
aplan, Paul G.	SNL	MTS	x í	x		
endorski, Frank	State of NV	Observer	X	X		
lamerus, Leo J.	SNL	MIS	X	X	X	
lein, Stanley H.	SALC	Manager, QA	X	x	X	
aub, T. W.	SNL	MIS	x	x		
eedom, Steve	WED	Physical Scientist	X	X		
acDougall, Bugh R.	St	Surface Facilities	X	x		
kansell, Wendel B.	MED	QA Engineer	X	X X		
lerren, G. T.	SNL	Department Manager	x	X		
liller, Warren	SNL	STA	X	X		X
ionks, Royce	WIPO	QA Engineer	X	X		X
iontoya, Annamarie	œs		X			
limick, Fran	SNL	Labaratory Prop.	X	X		X X
unes, Henry	LANL	oa pl	X			X
eshel, John	NRC	Geotechnical Engineer		X	X	
eters, Forrest D.	SAIC	OA Geologist	X	X		
hillips, J. S.	SNL	MTS	X	X		X
rice, Ron	SNL	Laboratory Prop.	X	X	X	X
rindle, Robert W.	SNL	MTS	X	X	X	
autman, C. A.	SNL	MTS	X	x		x
ichards, R. R.	SNL	QA Coordinator	X	x	X	X X
obb, R. M.	SNL	Mining Engineer	X	X		X
uth, Frederick J.	SAIC	QA Engineer	X	x	X	x
chelling, F. J.	SNL	MIS	X	X		
chwartz, Bary M.	SNL	STA	X	X	X	X
innock, Scott	SNL	Supervisor	X	x		
harpton, S. E.	SNL	MLS	X	x		
tevens, Al	SNL	Supervisor	X	X		
tinebaugh, R. E.	SNL	MIS	X	X		X
ublette, William	SAIC	Geotechnical Engineer		×	X	X
ubramanian, C. N.	SNL	MTS	x	X	X	x







AUDIT REPORT 88-06 ENCLOSURE 2

	REALDIT ONFERENCE	DURING AUDIT	AUDIT STATUS	POSTNUDIT
Tanious, NaiemNRCGeotechnical EngineerTang, MarySNLMLSTillerson, JoeSNDivision SupervisorTillery, P. M.LATARIB StaffThompson, CatherineSAICQA Engineer'Useth, James A.SAICQA EngineerUmshler, Sue E.DOE/ALSafety EngineerWatson, Thomas L.HARZATechnical SpecialistYeager, JamesSNLHISZismerman, SusanState of NVQA Manager	X X X X X X X X X X X X X X X X X X X		X	XX



ENCLOSURE 3

Department of Energy

Nevada Operations Office P. O. Box 98518 Las Vegas, NV 89193-8518

NB5 #1.2.9.3 QA Level I

AUG 3 0 1988

Thomas O. Hunter Technical Project Officer for Yucca Hountain Project Sandia National Laboratories P.O. Box 5800 Organization 6310 Albuquergue, NM 87185

YUCCA HOUNTAIN PROJECT OFFICE (PROJECT OFFICE) QUALITY ASSURANCE (QA) STANDARD DEFICIENCY REPORTS (SDRS) RESULTING FROM QA AUDIT 88-06 OF THE SANDIA NATIONAL LABORATORIES (SNL) IN SUPPORT OF THE YUCCA HOUNTAIN PROJECT (PROJECT) (NN1-1988-3380)

Enclosed are 14 SDR Nos. 166 through 179 that were generated as a result of the Project Office QA Audit 88-06 of the SNL support of the Project.

Provide responses to each SDR by completing Blocks 14 through 18 as appropriate on the first page of each SDR. Be advised that the audit checklist references provided on each SDR are for the Project Office internal use and should have no bearing on your ability to respond to the cited deficiencies. Copies of the responses are due back to this office within 20 working days from the date of this letter. You are asked to send the original copy of each SDR response to Juanita J. Brogan of Science Applications International Corporation (SAIC), Las Vegas, Nevada.

If you have any questions, please contact Gerard Heaney of SAIC at FTS 544-7739.

James Blaylock Project Quality Manager Yucca Mountain Project Office

YMP: JB-3442

Enclosure: SDR Nos. 166 through 179





	MPO STANDARD DEFICIENCY REPO	N-QA-038 3/87
t Dete 8/3/88	2 Severity Level 1 2 1	3 Page 1 of 1
S Discovered During 3a WAPO Audit 88-06 S Organization	Identified By B. Mansel 35 Branch Chief Concurrence Date N/A	4 SDR No. 166 Rev. 0
1 2.20	s Person(s) Contacted R. M. Baehr	7 Response Due Date is 20 Working Days from Date of Transmittal
The SNL-NNWSI-QAPP compiled by the au	cklist Reference, if Applicable) , Rev. O, Para. 18.5, states "The au dit team, signed by the Lead Auditor efer to audit checklist Item No. 18-	r, and issued within 30
Contrary to the about 15, 1988, was not surpassing the 30	ove, the audit report for audit MAC issued at the time of this WMPO Audi working day issuance requirement.	it 88-06, thereby
10 Recommended Action(s Issue audit report	E) II Remedial I Investigative I Con MAC 88-1.	rrective
11 QAE/Load Auditor Date	Afro All // and a mon	s Project Quality Mgr. Date James Blanfrif. 8/18/83
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Originating QA	8 Requirement (SNL NNWSI 1 Reporting 1 shall send	Project QA Pro for Items and	ocedure, Activiti	o, if Applicable) QAP 15-1, Rev. O, "No es," Para. 5.1.7.3, i the QASC, the response	itates "The QA	Coordinator
Z	There is no and SNL's	IPO were sent	copies o	hat QASC, the response f any NCRs (i.e., trans hat QASC does not have	insmittal lette	r).
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SDR No	. 167	Rev. O	Page 2	of 2
8 Reco	virement (continued)		
		(Refer to audit checklist Item No. 15-4)		
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	à	Contrary request	ed or provide	d for 10 sto	ts, (1) receipt a p work memos issu re not provided b	ied on Mai	rch 21, 1988	3, (2)
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WMPO STANDARD DEFICIENCY REPORT CONTINUATION SHEET

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8 Requirement (continued)

may use a letter or memorandum to impose a work stoppage. Such correspondence should contain, at least: D) a request for immediate acknowledgement of receipt of the notification.

Fara. 4.3 states "Corrective actions will be documented in the disposition section of the NCR or by letter or memorandum to the initiator."

Para. 4.4.3 states "For work stoppages imposed by means of letter or memo, the initiator and the QA Coordinator will verify to their satisfaction that appropriate corrective actions have been implemented. At that time the initiator will prepare a letter or memo to the responsible party which refers to the initiating correspondence and the activity which was subject to the stoppage and which states that the work stoppage is rescinded." (Refer to audit checklist Item Nos. 1-2, 1-3, and 1-4)

9 Deficiency (continued)

initiator, (3) recision of the 10 stop work orders was not documented.





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A Orenuz	1 274	n 6 Person R. R. R	(s) Contacted ichards	7 Response Due Date is 20 Working Days from Date of Transmittal								
	 B Requirement (Audit Checklist Reference, if Applicable) NNWSI Project QA Plan, NYD-198-17, Rev. 5, Section II, Quality Assurance Program, " Para. 5.1, states "All NNWSI Project participants shall establish requirements for the selection, indoctrination, and training of personnel Deficiency 											
2	Contrary position	Contrary to the above, position descriptions reviewed for four functional positions on the NNWSI Project did not identify the minimum education and										
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Page 2 of 2

8 Requirement (continued)

performing or verifying activities that affect quality. The requirements shall establish position descriptions that set forth minimum personnel qualifications and provide for appropriate indoctrination or training or both, prior to initiation of activities that affect quality."

Para. 5.1.1 states "Minimum education and experience requirements shall be established and documented in position descriptions for each position involved in the performance of activities that affect quality." (Refer to sudit checklist Item No. 2-27)

9 Deficiency (continued)

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Position Descriptions for SNL Deptartment 6310," dated July 22, 1988). The requirements in block 8 above have not been incorporated into SNL implementing procedures.

10 Recommended Actions (continued ;

- 2. Ensure the requirements contained in Block 8 are incorporated into appropriate SNL procedures.
- 3. Reinstruct appropriate personnel to revised procedural requirements. Provide objective evidence of the reinstruction with response to the SDR.
- 4. Ensure SNL contractor Q. programs incorporate the requirements contained in Block 8.

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	WMPO STANDARD DEFICIENCY REPORT CONTINUATION SHEET	N-QA-038 10/86
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codes, stand identified, design organ Para. 2.7.1	at (continued) lards, manufacturer's design data, and quality standards s documented, and their selection reviewed and approved by disation and the responsible QA organisation." states that design output documents shall "Show evidence view and approval cycle has been achieved prior to release	the responsible that the
procurement, activities. participatio	construction or release to another organisation for use As a minimum the review and approval cycle shall include on of the technical and QA elements of both the responsible and the WAPO. (Refer to audit checklist Item No. 3-10)	in other design the
9 Deficiency	(continued)	
Reports) for	QA Level II design activities.	
10 Reconnend	ed Actions (continued)	
the lack	the required reviews and investigate to determine what is of QA review and approval has had on SNL design input an ocuments.	
	ct appropriate personnel to revised procedural requirement objective evidence of the reinstruction with response to t	
	esign subcontractor QA programs incorporate the requirement d in Block 8 above.	a ts

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WMPO STANDARD DEFICIENCY REPORT CONTINUATION SHEET

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N-QA-038

8 Requirement (continued)

report."

Para. 4.5.2 states "Follow-up action will be taken by observing objective evidence to verify that corrective action has been accomplished as scheduled."

Para. 4.5.3 states "After the corrective action has been verified, the lead auditor will issue a close-out letter stating that the corrective action is adequate." (Refer to audit checklist Item No. 18-5-A)

9 Deficiency (continued)

audit findings 1, 2, 3, 4, 5, 7, 8, 9, and 10 from the same SNL Audit 87-1.

10 Recommended Actions (continued)

- 2. Reinstruct appropriate personnel to procedural requirements. Provide objective evidence of the reinstruction with response to the SDR.
- 3. Investigate to determine if the lack of response and follow-up to verify corrective actions has caused any adverse impact on quality related activities.

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8 Requirement (continued)

herein...Deviations within applicable criteria are permissible for Level II items and activities provided that adequate justification has been documented and approved by WMPD.* (Refer to audit checklist Item Nos. 3-10 and 3-11.)

9 Deficiency (continued)

are less restrictive for (1) methods of design verification and (2) personnel qualifications for performing design verifications without appropriate documented justification and approval from WMPO. Additionally, SNL DOP 3-4, "Design Investigation Control," Rev. B, contains less restrictive requirements for the review and approval of QA Level II Design Investigation Memos (DIMs) as QA is required to only review and approve QA Level I DIMs.

10 Recommended Actions (continued)

- 2. Reinstruct appropriate personnel to revised procedural requirements. Provide objective evidence of the reinstruction with response to the SDR.
- 3. Investigate to determine what impact the less restrictive requirements for Level II design activities has had.
- 4. Ensure design subcontractor QA programs are in compliance with revised SNL QAPP requirements.

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8 Requirement (continued)

item or task is assigned a QA level without further subdivision, all of its subparts will have the same QA level unless an exemption is specifically documented and justified as exempt." (Refer to audit checklist Item No. T-122.)

9 Deficiency (continued)

The QA Level III scoping work was performed in the following activities:

- 1. A.6 Mechanical properties of welded, devictified Topopah Spring Hember at high temperature and/or low strain rates.
- 2. A.7 Anisotropy of mechanical properties of welded, devitrified Topopah Spring Member.
- A.8 Tensile strength of welded, devitrified Topopah Spring Hember. 3.
- A.9 Mechanical properties of fractures in welded, devitrified Topopah 4. Spring Member.

Note: It was observed during the audit that SNL has a draft revision to the Laboratory Properties Modified Work Plan which does contain QA Level III Quality Assurance Level Assignment Sheets for the scoping work in the above activities.

B) Contrary to the above, Design Investigation Hemo (DIH) NO. 37 is identified as QA level III. However, the Hodified Work Plan "Preclosure Safety Analysis" Revision B which governs the work in the DIH is currently at QA level II.

10 Recommended Actions (continued)

- Investigate to determine if the performance of scoping work at QA Level III 2. has any adverse impact on the QA Level I work activities (i.e., data collection).
- 3. Revise DIM 37 to indicate the appropriate QA level.

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8 Requirement (continued)

SOR No. 174

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lined through text and initialing and dating by the person authorised to issue such corrections." (Refer to audit checklist Item No. 7-2.)

9 Deficiency (continued)

attached to Connolly to Nimick letter, dated 2/22/88, Purchase Request 239599/5-24-88, and NCR 87-1. Other examples were observed but not noted.

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	WMPO STANDARD DEFICIENCY REPORT CONTINUATION SHEET	N-QA-038 10/85
DR	No. 175 Pev. 0 Page 2	of 2
8 I. B)	equirement (continued) where appropriate: A) identification of computer calculations, including computer type, program name, program version, and the basis of application to the specific problem, B) evidence of computer program verification as specified in DOP 3-2, "Software Quality Assurance Requirements." (Refer audit checklist Item Nos. T-173 and 178.) Para. 8.0 of DOP 3-4 states "Copies of all correspondence and documentation, such as the DIM, transmittal letter(s), ATM, APM, revision	to
0 h	to the DIM or ATM, final results and the final report will be maintained in the SNL/NNWSI Department 6310 Records File. eficiency (continued)	
B.		
10 1	lecommended Actions (continued)	
	DIM files.	
2.	Review other DIM packages for similar conditions.	
3.	Reinstruct appropriate personnel to procedural requirements. Provide objective evidence of the resintruction with response to the SDR.	
4.	Institute a technical and QA review of all design packages for technical adequacy and completeness at the close of each DIM.	
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8		1. Revi	ise the DIM	to include	the required	justificat	ion.	
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8 R	equirement ()	continued)				•
B.	be used unles ties are used	nce properties derived from the Reference Informat ss otherwise specified. If other than NNWSI refer d, then the justification as to why they were not 11 the reasoning as to why the properties to be us	ence pr used wi	ope: 11	r-	•
∎.		n of any special qualifying tests for verification ecessary), i.e., benchmarks.	or val	i -		
	(Refer to au	dit checklist Item No. T-16.)				
9 D	eficiency (c	ontinued)				
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10	Recommended Au	ctions (continued)				
2.		ppropriate personnel to procedural requirements. I idence of the reinstruction with response to the S			-	

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s Organization 6 Person(s) Contacted SNL Richards a Requirement (Audit Checklist Reference, if Apolicable)	7 Response Due Date is 20 Working Days fror Date of Transmittal
SNL 6 Person(s) Contacted SNL Richards a Requirement (Audit Checklist Reference, if Apolicable)	20 Working Days from Date of Transmittal
S = Deficiency There was no objective evidence provided to demonstrate the	s shall establish
6 leaders, principle investigators, or other program members need for retraining in revised procedures. There was no of	have evaluated the piective evidence
10 Recommended Action(s): I Remedial I Investigative I Corrective I. Revise the current SNL training system to require that retrained/reinstructed to procedures when they are revi	SNL personnel are
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WMPO	STANDARD	DEFICIENCY	REPORT
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SOR No. 178 Rev. 0

8 Requirement (continued)

performed by the originating organisation." (Refer to audit checklist Item No. 5-8.)

10 Recommended Actions (continued)

QA requirements.

- 2. Ensure appropriate SNL procedures contain the requirement for a QA review of procedures.
- 3. Investigate to determine if an adverse impact on quality activities occured if a QA requirement was discovered to be omitted from the technical procedures.

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AN DUISUDUO	Requirement (Audi SNL DOP 3-5, "If a signific shall adhere t	Design Control ant calculation	and Verification," Rev. n is to be performed as p	O, Pars. 4.1.3.4, states part of design, the PI E Definition Requirements.		
5	Complex calcul ventilation sy	sten, undergrou	the design of complex sy und excavations and shaft routine calculations und			
DAVANDUON	10 Recommended Ac	tion(s): II Reme	idial 🔲 Investigative 🖾 Co	prrective		
5	1. Review to calculatio		h calculations are signif ce with DOP 3-3.	icant and perform those		
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WMPO STANDARD DEFICIENCY REPORT CONTINUATION SHEET

Rev. 0

N-QA-038 10/86

8 Requirement (continued)

SDR No. 179

If routine calculations are performed as part of a design task, the investigator or analyst shall adhere to the analysis and calculation requirements for routine design calculations in DOP 3-10, Routine Design Calculations (or their equivalent)." (Refer to audit checklist Item No. T-32)

9 Deficiency (continued)

Design Calculations."

Discussion: For SNL to perform a complex (Scientific Analysis and Calculation) a Problem Definition Nemo (PDM) is required to be issued in accordance with DOP 3-3, "Analysis Definition Nemo." During the course of the audit, it was observed that there have not been any PDMs issued to the subcontractor who is performing the complex calculations described above.

10 Recommended Actions (continued)

- 2. Investigate to determine if the use of the inappropriate procedure to perform the calculations has caused any adverse impact on the quality of the work products.
- 3. Reinstruct appropriate personnel to procedural requirements. Provide objective evidence of the reinstruction with response to the SDR.

WMPO /	AUDIT	REPORT	NO.	88-06	- ENCLO	SURE 4

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WMPO OBSERVATION NO. 88-06-01 CONTINUATION PAGE

Discussion (Continued)

DOP 17-1, "Records Hanagement System," Rev. 0, Para. 5.5, states in part, "Minor corrections to other documents shall be made by drawing a single line through the information to be changed, writing the change adjacent to the lined through text and initialing and dating by the person authorized to issue such correction. A brief explanation for correction may be placed in the margin when appropriate."

DOP 17-1, Appendix B, Para. 2.3.1 states, "If the document is not acceptable the Records Coordinator (RC) documents the reasons for rejection and returns document, transmittal form (if 'ilable) and rejection memo to the document sender for correc i sction. In some cases it may be possible to correct the document by calling the responsible individual to obtain the missing information, which the RC then uses to correct the document in accordance with Section 5.5 of this procedure."

- A) The QAPP, Para. 17.3.8 and DOP 17-1, Para. 5.5, state that document corrections shall identify the person authorized to issue such correction and provide for appropriate review or approval by the originating organization. However, DOP 17-1, Para. 2.3.1, allows the RC to call the originating office and obtain "missing information" and use this information to correct the document. Therefore, the correction is not made by an authorized person and the correction does not go through appropriate review/approval. Additionally, other records staff members make corrections to documents in the same manner allowed for the RC.
- B) Minor corrections e made by RC or other records staff. However, minor cor actions are not defined.
- C) The procedure addresses corrections made to documents before processing the records into project files. Corrections to documents that have been processed into the project files are not proceduralized.

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WHPO AUDIT	REPORT	NO.	88-06		ENCLOSURE	4
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WMPO OBSERVATION NO. ________ CONTINUATION PAGE

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Discussion (Continued)

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revealed no method to review revised SNL DOPs for impact on PB procedures. Without an impact review by PB, requirements imposed by either MNPO or SNL may not be incorporated into PBs program.

A review of the Bechtel QAPP and implementing procedures revealed a similar situation as described above. For example, Bechtel procedure EDPI 4.46-06 (Project Drawings), <u>dated 10/18/86</u> and SNL DOP 3-1 (Preparing, Reviewing, Approving, and Issuing Engineering Drawings), <u>dated 2/9/88</u>.

No mechanism has been imposed by SNL on subcontractors to ensure that revisions to SNL DOPs are reviewed for impact on subcontractor procedures.

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WMPO OBSERVATION NO. <u>88-06-03</u> CONTINUATION PAGE

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Discussion (Continued)

quality related disputes. An organization procedure separate from the QAPP would expedite the process SNL must take to indicate changes to the SNL organization.

PART B

The NWSI Project QAP requires that each participating organization perform a trend analysis of corrective action documentation. The audit team request that SNL provide a schedule for when a trend analysis procedure will be developed.

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WMPO OBSERVATION NO. <u>88-06-04</u> CONTINUATION PAGE

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Discussion (Continued)

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Another benefit to establishing a formal interface will be that the two participants will be better able to coordinate the collection of ground motion data. Presently, the USGS is planning to install additional sensors in the Yucca Mountain area. It would be beneficial to the NWSI Program if Sandia were able to participate in the decision to determine where these sensors will be located. The effective placement of these sensors may enhance Sandia's present field network while still satisfactorily providing the USGS their data collection objectives.

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WMPO OBSERVATION NO. 88-06-05 CONTINUATION PAGE

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OF 4

Discussion (Continued)

- B) The current modified work plan for WBS 1.2.1.4.1.S "Flow and Radionuclide Transport" WP No. 12141-86, Rev. B, is not up to date. Task C, verification and validation, is no longer performed under WBS 1.2.1.4.1 (except the verification portion). The actual work being performed does not fully cover the work specified under Tasks A and B. Specifically, there has been no performance of radionuclide transport model development work as described in Tasks A and B of the Modified Work Plan. In addition, the activities described in the WAS for WBS 1.2.1.4.1 do not include any activities for radionuclide transport.
- C) Modified Work Plans for WBS 1.2.4.3.2.S "Surface Facilities" Rev. B, and WBS 1.2.4.3.5.S "Underground Service Systems" Rev. B, describe previous work but do not describe QA levels or QA controls. Work Plans for WBS 1.2.4.3.3.S "Shafts and Ramps" Rev. B, and WBS 1.2.4.3.4.S "Underground Excavation" Rev. B, do not describe previous work, QA levels or QA controls. This information is required by SNL QAPP Rev. 0, Para. 3.1.1. (It should be noted that the Modified Work Plans were issued prior to the QAPP being in place.)
- D) Modified Work Plans for WBS 1.2.4.3.4.s "Underground Excavation" Rev. B and WBS 1.2.4.3.S.s "Underground Service Systems" refer to standard engineering design and analysis procedures or widely accepted industry standard procedures under the technical procedure sections of these work plans. The work plans should refer to specific SNL or subcontractor procedures used in performing work activities.

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WMPO OBSERVATION NO. 88-06-06 CONTINUATION PAGE

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Discussion (Continued)

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N-QA-012 8/88

Discussion (Continued)

SNL DOP 3-1 "Preparing, Reviewing, Approving and Issuing Engineering Drawings". This will provide documented evidence that the questions posed in the SNL QAPP have been addressed and will provide additional evidence of the review process.

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WMPO AUDIT 88-06 Iom Watson 8-3-00 Organization: Person(s) Contacted: B. Steinbaugh, T. Blejwas Response Due Date 20 Days from Date of Transmittal Oiscussion: Quality Level III or nonqualified data are being used in the performance of Quality Level II design activities as evidenced by 1) statements to that affect by SNL design personnel; 2) DIM 113, designated as Quality Level II, uses assumed broken rock density designated as Quality Level III in the Reference Information Base; 3) PB/S 57 references previous Quality Level III work; 4) PB/S 517 (DIM 114) dtd. February 1988 references RIB version 2.002; 5) DIM 114 Subtask 1.17-3 Calculation Notebook Volume 3 of 3, page 28 references information from the SCP-CDR which is a Quality Level III document. Quality Level III								
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Discussion (Continued)

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data may be used in support of a Quality Level II design if, 1) a decision to proceed "at risk" is made; 2) design outputs are held as "contingent upon verification of data" until Quality Level II data supports the design data (or requires design change if it does not), and 3) effected down stream designs are also identified as contingent upon the outcome of verification of the "at risk" design. Traceability of downstream design impacts is the key to using less qualified data in Quality Level I or II designs. This practice is consistent with the position the Project Office has taken with respect to the design of the exploratory shaft.

This observation does not require a response from SNL.

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Discussion (Continued)

For example, the Mined Material Handling Method Study (which has no impact on safety or waste isolation) is designated as Quality Level II while other studies such as the Waste Emplacement Orientation and Shaft Liner Design Methodology Studies are designated Quality Level III (both having potential safuty and waste isolation impacts). These studies are for the purpose of supporting the repository Advanced Conceptual Design. The Quality Level assignment process should be reviewed to assure the appropriate QA Levels have been assigned to these studies.

WMPO OBSERVATION NO. 88-06-10 CONTINUATION PAGE

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Discussion (Continued)

For example, the Mined Material Handling Method Study (which has no impact on safety or waste isolation) is designated as Quality Level II while other studies such as the Waste Emplacement Orientation and Shaft Liner Design Methodology Studies are designated Quality Level III (both having potential safety and waste isolation impacts). These studies are for the purpose of supporting the repository Advanced Conceptual Design. The Quality Level assignment process should be reviewed to assure the appropriate QA Levels have been assigned to these studies.



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WMPO OBSERVATION NO. _______ CONTINUATION PAGE

Discussion (Continued)

DISCUSSION

1. N. S.

- 1) The work plan, "Flow and Radionuclide Transport," No. 12131-86 Rev. B, shows that the task A, "Model Development for Fluid Flow and Radionuclide Transport," will be conducted entirely at QA Level III. This task will essentially establish the theoretical framework for mathematically describing the physical process and hydrologic parameters. Since there is no indication that the model development will be done at QA Level I, it is a serious concern.
- 2) Task B, Flow and Transport Analyses, will assess and modify selected codes from Task A. This task will be conducted at QA Level III initially and the final analyses will be conducted at QA Level I. Presumably, Task B can pick up the model development effort in Task A and continue into QA Level I. However, there are no criteria established and the PIs are not sure when the transition from QA Level III to QA Level I will occur. Without a clear guideline, there is a potential risk that the final code may not satisfy the QA Level I requirements before the license application analyses.
- 3) SNL DOP 3-2 "Software Quality Assurance Requirements" requires a life cycle plan to be developed for QA I and II software. Since the fluid flow and radionuclide transport model will continuously evolve and especially since the physical and mathematical basis will be generally established during the early scoping study stage, the life cycle plan for this specific model development should include both the early QA Level III activities as well as the QA Level I activities. This life cycle plan should clearly indicate the criteria for the transition from QA Level III to QA Level I.

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	perind o	Organization: SNL		Person(s) Contacted: T. Laub			Response Due Dete Is 20 Deys from Date of Transmittal
	Completed by Originating QA Organiza	Discussion: The procedure for Design Investigation Memos (DIM) DOP 3-4 "Design Investigation Control" Rev. B, does not require that the supervisor certify the analyst performing the design analysis in the DIM. However, the procedure for Problem Definition Memos (PDM) DOP 3-3 "Analysis Definition Requirements" Rev. A, does require certification of the analyst by the supervisor. The two procedures are inconsistent. The same type of certification should be required for individuals performing design investigation and analysis work. In addition, a definite statement with an explanation of the basis for the certification would be appropriate. (DIM 124 generated by Los Alamos Technical Associates contairs a good example of minimum certifications.)					
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) And and a	Organization: SNL	Person(s) C R. Richar		Response Due Date is 20 Days from Date of Transmittal				
-	Completed by Originating OA Organiza	Discussion: The training assigned by SNL supervisors (see SNL QAP 2-5 "NNWSI Project Training and Familiarization Procedures" Para. 5.1.1), should be reevaluated. There are inconsistencies in the training assigned to personnel who hold similar positions within the organization. Examples:							
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WMPO OBSERVATION NO. <u>88-06-13</u> CONTINUATION PAGE

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Discussion (Continued)

- A) Not all task leaders were assigned training to procedure QAP 2-3 "QA Level Assignment and Work Plans." Task leaders are involved with this activity.
- B) Not all task leaders were assigned training to procedures for procurements (DOPs 4-1, 7-1, and 7-2) or nonconformances (QAP 15-1). Task leaders are involved with these activities.

Additionally, the audit team had a difficult time reviewing records to determine who had been assigned what training and if indeed the training was completed. The audit team recommends that a training matrix be established to ensure individuals are given appropriate training per their assigned position.

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		Organization: SNL	Person(s) C I. Laub, S. Steinb	Sontacted: augh	Response Due Date is 20 Days from Date of Transmittal				
	Completed by Originating OA Org	Discussion: The traceability of design and experimental activities is not readily maintained from the final output documents (SAND Reports) to the supporting input documents Sandia Letter Reports (SLTRs) to the Design Investigation Memos (DIMs) or Problem Definition Memos (PDMs) and then to the task identified in the Modified Work Plans (MWPs). Date Branch Manager Date							
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88-06-14 WMPO OBSERVATION NO. CONTINUATION PAGE

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Discussion (Continued)

A) The relationship of DIMs to Tasks and Activities as identified in the MWPs for the underground design activities, is very unclear. To provide traceability and an overall sense of direction, DIMs should specifically relate to tasks identified in the MWPs. The sum of all tasks (DIMs) would then satisfy the work identified in the MWP, and work plan tasks could better be tied to project logics and schedules.

B) Tracing a SAND report back to supporting SLTRs, PDMs, and DIMs in the Preclosure Safety Analysis Activity is difficult and often depends on the author's memory. It is recommended that the documentation file for a SAND report or other SNL output documents identify applicable SLTRs, PDM, DIMs and other appropriate documents.



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	SNL		B. Steinba	lugh		20 Days from Date of Transmittal		
	Discussion:							
	Organization: SNL Discussion:	SAND reports do not provide subsequent application guidance or limitations. DOP 6-2 "Reviewing, Approving, and Issuing Technical Information Documents" should be revised to require that Quality Assurance Level designations for all information contained in these reports be identified and/or a lead in page dedicated to placing limitation/restrictions for subsequent design use or reference should be added.						
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WMPO OBSERVATION NO. 88-06-17 CONTINUATION PAGE

Discussion (Continued)

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This file area should be maintained by the Project Records Staff and organized based on the PDM file numbers.

Under the direction of the Project Records Staff, PI's and analysts would copy and/or enter computer generated analysis files into the project file area along with a written log documenting:

- 1) File Name,
- 2) PDM, DIM and/or Analysis Number,
- 3) Description of the File,
- 4) Program Name and Version of the program which reads and/or wrote the file.
- 5) Sandia Letter Report and/or Draft SAND report number that the analysis supports.

A copy of the file log would also be entered into the PDM and/or DIM file.

Under the current system at Sandia the PI and/or analyst is responsible for maintaining analysis files in their own file areas. Given the amount of time necessary to review/approve SAND reports and other project documents, there is a risk that: 1) the analyst will leave Sandia and the files will not be complete for another individual to continue the activity, and 2) Computer operating systems will change making the old files unreadable if the files were not adequately changed when the new operating systems came on line, or 3) the PI or analyst will delete the files or forget the purpose of each file. Given that these computer generated files may be the only record or documentation for analyses reported in SAND reports, design or licensing documents, they should be treated as traceable records and stored in a manner which allows retrievability and access at a later date. N-QA-012 8/88

WMPO OBSERVATION NO. ________ CONTINUATION PAGE

N-QA-012 8/68

Discussion (Continued)

- o Objective of Verification
- O Code Capabilities and/or Models Exercised,
- Physical Problem Description,
- o Assumptions,

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- Analytic or Empirical Solution and/or Data,
- Acceptance Criteria,
- o Analysis Procedure:
 - Approach,
 - Input,
 - Analysis Steps.
- O Discussion of Results:
 - Graphical Comparison,
 - Tabular Comparisons.

It is recommended that Para. 6.7 of DOP 3-2 be modified to require that the above stated topics be addressed (where applicable) in the documentation of application verification efforts. The proposed approach would ensure that application verification efforts are adequately and uniformly documented as well as make it easier for outside individuals to evaluate the application verification effort.

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•			WMPO AUDIT RE	PORT NO. 88-06 - ENCLOSURE	4	
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WMPO OBSERVATION NO. ____88 CONTINUATION PAGE

88-06-19

N-QA-012 8/88

Discussion (Continued)

- 7.5.

The University of New Mexico is performing QA Level II mineralogical work using EP-0007. This work is being performed under task B.1. Results from this task will be combined with previously developed unqualified porosity, mechanical, or thermal data to produce empirical relationships. These empirical relationships will be unqualified and therefore inconsistent with the QA Level II designated for this task.

A statistical analysis was performed in task B.2 as part of PDM-33. The process of this task was performed at QA Level II. However, the data that was used in this statistical analysis was unqualified. Therefore, the resulting data is unqualified which is inconsistent with the QA Level II designated for this task.

It is recommended that the Modified Work Plan be revised, as per QAP 2-3, Rev. A, Section 5.1, such that QA Level III tasks are added for analyzing QA Level III or unqualified data.

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•	WMPO AUDIT REPORT NO. 88-06 - ENCLOSURE 4					
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WMPO OBSERVATION NO. 88-06-20 CONTINUATION PAGE

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Discussion (Continued)

Using interpolation methods to estimate porosity values can lead to significant errors considering the random variability of porosity with depth that exists in the sites volcanic tuffs. Therefore, it is recommended that the empirical relationships developed from the interpolated porosity data not be used until new data is developed or the present empirical relationships are verified by conducting porosity tests on core sample remnants from the mechanical testing.

Presently, these empirical relationships have been used for developing mechanical properties in the RIB, SCP and possibly other documents as well. After previous and current discussions with cognizant project personnel, they have stated that they are aware of the inherent problem with the empirical relationships developed from interpolated porosities and they indicated that these questionable relationships will not be used in the future and will not be implemented in the next RIB.

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Discussion (Continued)

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variability analysis. Because of this lack of traceability, it makes it impossible to perform a quality control check on the variability analysis and the rock property values presently in the SCP/CDR and the RIB. It is recommended that in all future work, adequate traceability is maintained.

The Project Office will follow-up this situation subsequent to receiving SNLs response.

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